

Oklahoma

[Title II](#) | [ADAP](#) | [Title III](#) | [AETC](#) | [Dental](#)

State CARE Act Program Profile

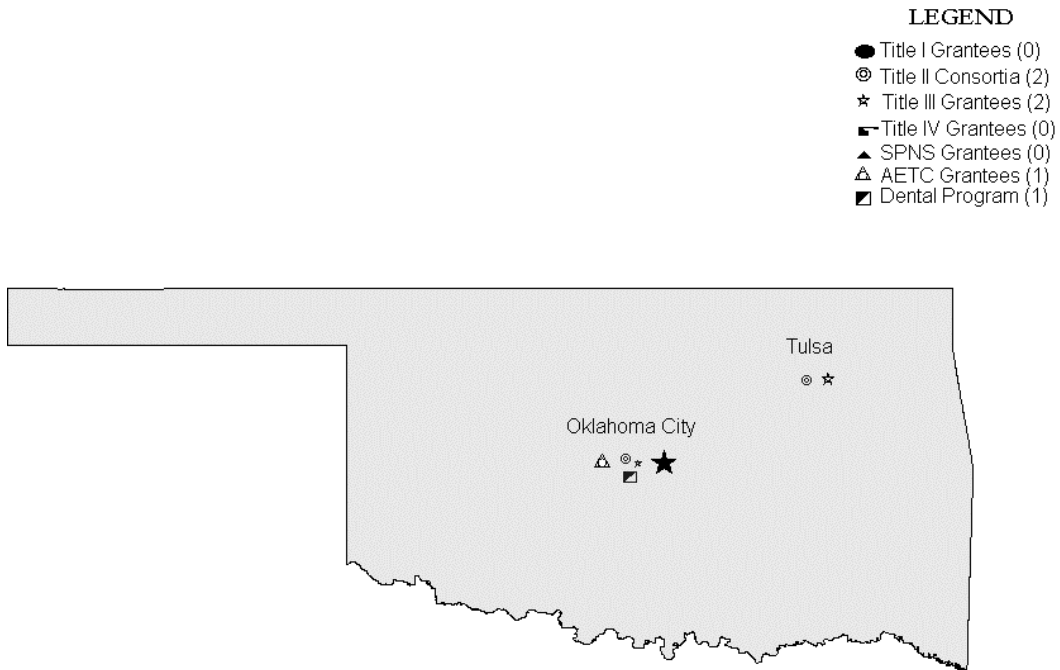
CARE Act Funding History Since 1996

Fiscal Year	1996	1997	1998	Total
Title I	\$0	\$0	\$0	\$0
Title II (including ADAP)	\$1,656,387	\$2,282,191	\$2,890,518	\$6,829,096
ADAP	(\$241,524)	(\$728,086)	(\$1,281,597)	(\$2,251,207)
Title III	\$773,573	\$788,957	\$833,407	\$2,395,937
Title IV	\$0	\$0	\$0	\$0
SPNS	\$0	\$0	\$0	\$0
AETC	\$1,989	\$5,000	\$55,000	\$61,989
Dental	\$2,166	\$3,091	\$2,268	\$7,525
Total	\$2,434,115	\$3,079,239	\$3,781,193	\$9,294,547

Number of CARE Act-funded Grantees in State (in addition to Title II and ADAP grants)

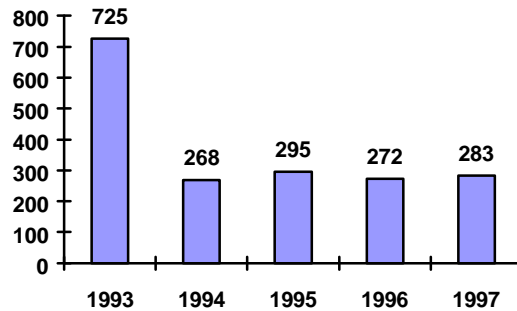
	1996	1997	1998
Title I	0	0	0
Title III	2	2	2
Title IV	0	0	0
SPNS	0	0	0
AETC (grantee or subcontractor)	1	1	1
Dental	1	1	1

Location of FY 1998 CARE Act Grantees and Title II Consortia



HIV/AIDS Epidemic in the State: Oklahoma (Pop. 3,317,091)

- ▶ Persons reported to be living with AIDS through 1997: 1,306
- ▶ New AIDS Cases by Calendar Year, 1993-1997
- ▶ Persons reported to be living with HIV infection (not AIDS) through 1997: 1,786
- ▶ State reporting requirement for HIV: Name-based reporting for HIV (initiated June 1988)
- ▶ State AIDS Cases (cumulative) since 1993: 1,843 (<1% of AIDS cases in the U.S.)



Demographics of AIDS Cases Reported in 1997

	State-Specific Data	National Data
Men (13 years and up):	86%	78%
Women (13 years and up):	14%	22%

	State-Specific Data	National Data
<13 years old :	1%	1%
13-19 years old :	0%	1%
20+ years old :	99%	98%

	State-Specific Data	National Data
White:	73%	33%
African American:	17%	45%
Hispanic:	2%	21%
Asian/Pacific Islander:	0%	<1%
Native American/Alaskan Native:	6%	<1%
Other, unknown or not reported:	1%	0%

	State-Specific Data	National Data
Men who have sex with men (MSM):	55%	35%
Injecting drug user (IDU):	15%	24%
Men who have sex with men and inject drugs (MSM/IDU):	8%	4%
Heterosexual contact:	8%	13%
Other, unknown or not reported:	14%	24%

Pediatric Cases, by exposure category

	State-Specific Data	National Data
Hemophilia/coagulation disorder:	0%	<1%
Mother with/at risk for HIV infection:	67%	91%
Receipt of blood transfusion, blood components, or tissue:	0%	<1%
Other, unknown or not reported:	33%	8%

Co-morbidities

	State Cases per 100,000 Population	U.S. Cases per 100,000 Population
Chlamydia (1996)	225.1	194.5
Gonorrhea (1996)	149.4	124.0
Syphilis (1996)	5.5	4.3
TB (1997)	6.4	7.4

Statewide Coordinated Statement of Need (SCSN)

To enhance collaboration in HIV needs assessment and planning activities among CARE Act grantees and to maximize CARE Act resources statewide, Title II grantees were required to develop, in collaboration with other CARE Act grantees, an SCSN by March 1998. SCSNs must include: a discussion of existing needs assessments; epidemiologic data; discussion of emerging issues in HIV care in the state; critical gaps in HIV medical and support services; and broad goals to address major service gaps.

- ▶ **Gaps:** services for non-English speakers; insurance; transportation; mental health, nutrition, needle exchange and employment services; support groups; medications; primary care, especially in rural areas; housing; services for the physically challenged; vision care; case management; coordination and collaboration among state and local agencies; and HIV education
- ▶ **Emerging Needs:** services for women; employment assistance; insurance continuation programs; medications; primary care; dental services; managed care; need to ease eligibility criteria for Title II services; mental health and substance abuse services; support groups; case management; nutritional supplements; education and prevention programs; testing services, including partner notification, for minorities, the incarcerated and rural populations; and decreased public interest in HIV

State Medicaid Information

In 1998, Medicaid is estimated to have covered 55% of U.S. adults with AIDS and 90% of pediatric AIDS cases. Applying these percentages to the number of AIDS cases in the U.S., at least 108,000 individuals with AIDS were covered by Medicaid in 1998.

Medicaid Income Eligibility Requirements

Eligibility Category	Income
Adult Aged/Blind/Disabled*	75% FPL
Pregnant Women	185% FPL
Medically Needy	42% FPL

*Income eligibility for State's ADAP program is 150% FPL.

Medicaid Prescription Drug Benefits Limits

Co-payment:	Yes
Limit on Rx per month:	Yes
Refill limit:	No
Quantity Limit:	No

Waivers

1115

Section 1115 of the Social Security Act gives the Secretary of Health and Human Services broad authority to waive provisions in Title XIX, the Medicaid statute. Populations covered vary from waiver to waiver, as does the scope of coverage and the nature of the provider organization.

1115 waiver: Yes

Beneficiary groups: Current AFDC and related beneficiaries (the spend-down portion of the medically needy population will stay FFS until the state is able to implement stream-lined eligibility procedures.) Aged, blind, and disabled beneficiaries will be covered during the second year. A proposed third phase will enroll long-term care recipients and persons with chronic mental illness.

1915(b)

Section 1915(b) of the Social Security Act authorizes the Secretary of Health and Human Services to waive compliance with certain portions of the Medicaid statute that prevent a state from mandating that Medicaid beneficiaries obtain their care from a single provider or health plans.

1915(b) waiver(s): Yes

Title II: Oklahoma

Title II funds are provided to States and Territories to improve the quality, availability and organization of health care and support services for PLWH. From FY 1991 to FY 1998, more than \$1.9 billion in funding was appropriated for Title II programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Title II Formula Grant	\$1,656,387	\$2,282,191	\$2,890,518	\$6,829,096
ADAP (included in Title II grant)	(\$241,524)	(\$728,086)	(\$1,281,597)	(\$2,251,207)
Minimum Required State Match	\$0	\$0	\$0	\$0

Allocation of Funds

	1998
Health Care (State Administered)	\$2,155,654/75%
Home and Community Care	(\$200,000)
Health Insurance Continuation	(\$0)
ADAP/Treatments	(\$1,955,654)
Direct Services	(\$0)
Case Management (State Administered)	\$0/0%
Consortia	\$440,020/15%
Health Care*	(\$27,000)
ADAP/Treatment	(\$110,000)
Case Management	(\$228,716)
Support Services**	(\$74,304)
Administration, Planning and Evaluation (Total State/Consortia)	\$294,844/10%

* includes: diagnostic testing, preventive care and screening, prescribing and managing medication therapy, continuing care and management of chronic conditions, and referral to specialty care.

** includes: counseling, direct emergency financial assistance, companion/buddy services, day and respite care, housing assistance, and food services.

Consortia Activities, FY 1997

States provide services directly or through subcontracts with Title II HIV care consortia. A consortium is an association of public and nonprofit health care and support service providers and community-based organizations that plans, develops and delivers services for people living with HIV disease.

Number of consortia in State: 2

Consortium Name	Location	Title II Funding, FY 1997
CarePoint, Inc.	Oklahoma City	\$375,094
HIV Resource Center (HIVRC)	Tulsa	\$226,508

Accomplishments

Clients Served (duplicated count), FY 1996:	960
Men:	83%
Women:	17%
<13 years old:	0%
13-19 years old:	0%
20+ years old:	100%
White:	72%
African American:	17%
Hispanic:	3%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	8%

► Improved Patient Access

- Between 1996 and 1997, the total aggregate number of clients accessing primary health care and support services through Title II consortia increased 20%, with 1,150 clients projected to be served in 1997.
- The State reported an increase of 33% between 1996 and 1997 in the number of individuals accessing medications through ADAP. As of June 1998, approximately 425 clients were enrolled, with about 50% receiving protease inhibitors, compared to 35% six months earlier.
- The ADAP formulary was expanded to include protease inhibitors during 1996-97, with a total of 21 drugs covered.

- Title II funding for a new initiative links HIV-infected prisoners, who are about to be released or paroled, to primary care, treatment, and support services to ensure continuity of appropriate therapies and care.

▶ **Cost Savings**

- The State explored participation in the Office of Drug Pricing's discount purchasing program and implemented a 340 rebate option in 1998 and expects to determine future direction based on further evaluation.

▶ **Other Accomplishments**

- Coordination between the State's counseling and testing services, STD clinics, and Title II programs has resulted in the provision of HIV counseling and testing to all pregnant women receiving care through county- or State-funded clinics and the linkage of seropositive women to appropriate treatment to reduce perinatal transmission.
- Through collaborative efforts between Title II, CDC prevention programs, and State STD programs, cross training was provided for nurses, counselors, and other providers during 1997.
- During FY 1998, the Title II program initiated transition to a unit-cost system for purchasing and tracking primary health care and support services.
- An informal Physician Advisory Committee, consisting of four infectious disease physicians and one pharmacist, provided recommendations on the ADAP drug formulary through 1997. For 1998, the grantee reported plans to establish a more formal Physicians Advisory Committee. Recommendations on other aspects of the program (i.e., eligibility criteria, policy and procedures) are made in part through consultation with Medicaid, but primarily through the statewide CARE Act Advisory Council ADAP Committee. For FY 1998, this committee consisted of four PLWH (one rural, two persons of color), representatives from Medicaid and the Departments of Human and Health Services, a case manager supervisor with expertise in accessing manufacturers' drug assistance programs, and a rural case manager.

AIDS Drug Assistance Program (ADAP): Oklahoma

ADAPs provide medications to low-income PLWH with limited or no coverage from private insurance or Medicaid. ADAP is just one of multiple sources of public and private funding for HIV treatment, the largest source being Medicaid.

Funding History

Fiscal Year	1996	1997	1998	Total
Title II Funds	\$1,050,786	\$1,381,311	\$1,997,958	\$4,430,055
State Funds	\$206,000	\$431,000	\$641,000	\$1,278,000
Total	\$1,256,786	\$1,812,311	\$2,638,958	\$5,708,055

Program

- ▶ Administrative Agency: Dept. of Health
- ▶ Formulary: 21 drugs, 4 protease inhibitors, 8 other antiretroviral drugs.
- ▶ Medical Eligibility
 - ▶ HIV Infected: Yes
 - ▶ CD4 Count: No
- ▶ Financial Eligibility
 - ▶ Asset Limit: No
 - ▶ Annual Income Cap: No
- ▶ Co-payment: No
- ▶ PLWH involvement in advisory capacity: The Ryan White Advisory Council's HDAP Committee provides recommendations to the program. During the FY 1998 planning period, four PLWH (one rural, two persons of color) served on the committee.
- ▶ Enrollment cap: 700
- ▶ Waiting list as of 10/98: No
- ▶ Waiting list for protease inhibitors as of 10/98: 300

Clients Served

Clients enrolled, 10/98:	559
Number using ADAP each month:	349
Percent of clients on protease inhibitors:	60%
Percent of active clients below 200% FPL:	100%

Client Profile, FY 1996

Men:	85%
Women:	15%

<13 years old:	0%
13-19 years old:	0%
20+ years old:	100%

White:	75%
African American:	15%
Hispanic:	3%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	7%

Title III: Oklahoma

Title III provides funding to public and private nonprofit entities for outpatient early intervention and primary care services. From FY 1991 to FY 1998, \$445.8 million was appropriated for Title III programs in the U.S.

Funding History

Fiscal Year	1996	1997	1998	Total
Number of Programs Funded in State	2	2	2	
Total Title III funding in State	\$773,573	\$788,957	\$833,407	\$2,395,937

Clients Served in FY 1996 by Title III Grantees in State

(Based on programmatic information from 1 grantee(s) in State)

- ▶ Total number of people provided HIV pre-test counseling and testing services by State's Title III-funded programs: 2,678
- ▶ Total number of people provided primary health care services by State's Title III-funded programs: 239
- ▶ Number of new HIV-infected patients enrolled in State's Title III-funded early intervention programs in the past year: 101
- ▶ New clients (adults only) in State's Title III-funded early intervention programs presenting with CD4:
 - ▶ under 200: 54%
 - ▶ from 200 to 499: 28%
 - ▶ above 500: 16%
 - ▶ unknown: 2%

Accomplishments

Clients served (primary care only), 1996:	239
Men:	87%
Women:	13%
<13 years old:	0%
13-19 years old:	0%
20+ years old:	99%

White:	70%
African American:	18%
Hispanic:	1%
Asian/Pacific Islander:	0%
Native American/Alaskan Native:	11%
<hr/>	
Men who have sex with men (MSM):	37%
Injecting drug user (IDU):	5%
Men who have sex with men and inject drugs (MSM/IDU):	2%
Hemophilia/coagulation disorder:	0%
Heterosexual contact:	14%
Receipt of blood transfusion, blood components, or tissue:	1%
Other, unknown or not reported:	41%

► **Improved Patient Access**

- In 1997, Oklahoma State University experienced a 49% increase in the number of clients from rural communities. A total of 109 of 470 enrolled clients reside in rural northeastern Oklahoma.
- The University of Oklahoma Health Sciences Center has provided care to over 400 new clients.
- The Early Intervention Services Clinic serves 54 counties in Oklahoma and provides a wide range of services including primary care, medications, dental services, optical services, women's health care, and outpatient mental health services.

► **Improved Patient Outcomes**

- In response to combination antiretroviral therapy, clients enrolled in Oklahoma State University's program have experienced viral load reductions to undetectable levels and corresponding rises in CD4 count. This physical outcomes study is currently in progress.

► **Cost Savings**

- More than \$1 million in free prescriptions are accessed each year through the Oklahoma State University's early intervention program. The pharmaceutical drug assistance programs accounted for at least 33% of the total medication needs in 1997. This is especially important since the ADAP program met only 9% of the prescription needs.
- Oklahoma State University has realized significant cost savings through the decline in hospitalizations over the last two years. The average rate of hospitalization decreased from four admissions per week to four admissions per month among Title III program participants, due largely to outpatient clinical services and access to combination antiretroviral therapies.

Title III Grantees, FY 1998

Grantee Name	Location	Service Area	Type of Organization
Oklahoma State Univ./College of Osteopathic Med.	Tulsa	918 Area Code	Hospital/University-based Medical Center
University of Oklahoma, College of Medicine	Oklahoma City	More than 40 Counties	Hospital/University-based Medical Center

AIDS Education and Training Centers: Oklahoma

The AETCs are a network of 15 regional education centers (75 local performance sites covering all 50 states, Washington, D.C., Puerto Rico, and the Virgin Islands) funded by the CARE Act to train clinical health care providers, provide consultation and technical assistance and disseminate rapidly changing information for the effective management of HIV infection. Targeted providers are CARE Act-funded programs, federally funded community migrant health centers, and clinicians serving persons living with HIV infection. From FY 1991 to FY 1998, \$171 million was appropriated for AETC programs in the U.S.

- ▶ AETC for Texas and Oklahoma
- ▶ States Served: Texas and Oklahoma
- ▶ Primary Grantee: University of Texas, Houston, TX
- ▶ Subcontractors in State: Department of Health, HIV/STD Services - Oklahoma City

Funding History

Year	1996	1997	1998	Total
Total AETC				
Funding for State	\$1,989	\$5,000	\$55,000	\$61,989

Training Highlights from FY 1997

- The AETC conducted trainings on a variety of topics including: preventing perinatal transmission of HIV in a large managed care organization; a session on adherence to antiretroviral regimens was conducted for the medical staff of the largest CARE Act-funded clinic in Texas; and an update on the science and treatment of HIV for case managers and testing and counseling personnel was presented at the Texas Statewide Conference on HIV/AIDS.
- The AETC conducted an education program on the prevention of perinatal transmission of HIV at the largest provider of maternal care in Texas. Following the training, HIV testing of pregnant women went from 5.7% to 64.2%. In the first year following the training, the agency estimated the 21 women who would not have been identified under the old testing guidelines were found to be infected with HIV.
- The AETC sends “Information Alerts” to all CARE Act-funded providers in the two State region as well as any provider who has attended an AETC training. The alerts address treatment guideline revisions and the availability of other resources that providers may wish to access.
- An arrangement was made with the Texas Department of Health to mail PHS treatment guidelines to all 700 physicians who are prescribing antiretrovirals under the State’s ADAP program. The Texas Department of Health will give CEU credit to physicians who read the guidelines and complete a test on the content of the guidelines. The AETC developed the test and grades those submitted.

- In conjunction with the University of Texas Medical School in San Antonio, the AETC organized an eight-hour teleconference covering basic and advanced topics in HIV care for broadcast to 12 sites in Texas along the Mexican border.

HIV/AIDS Dental Reimbursement Program: Oklahoma

The CARE Act HIV/AIDS Dental Reimbursement Program reimburses eligible dental schools and postdoctoral dental education programs for the reported, uncompensated costs of providing oral health care to PLWH. From FY 1996 (when the program was first funded by the CARE Act) to FY 1998, \$22.2 million in funding was provided for programs in the U.S.

Funding History

Year	1996	1997	1998	Total
Number of Programs Funded in State	1	1	1	
Total HIV/AIDS Dental Reimbursement Program Funding in State	\$2,166	\$3,091	\$2,268	\$7,525

Accomplishments

Est. clients served, 1996:	33
Men:	88%
Women:	12%
<13 years old:	6%
13-19 years old:	15%
20+ years old:	79%

HIV/AIDS Dental Reimbursement Program Grantees, FY 1998

Grantee Name	Location
University of Oklahoma	Oklahoma City